

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF NEVADA

Case number (if known)

Chapter

7☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

06/22

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name NITE LIFE EAST, LLC

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and *doing business as* names

FDBA Little Darlings3. Debtor's federal Employer Identification Number (EIN) 95-4547697

4. Debtor's address

Principal place of business

Mailing address, if different from principal place of business

8290 Broadway
Lemon Grove, CA 91945

Number, Street, City, State & ZIP Code

Carson

County

c/o CT Corporation System, RA
701 S. Carson Street, Suite 200
Carson City, NV 89701

P.O. Box, Number, Street, City, State & ZIP Code

Location of principal assets, if different from principal place of business

1560 N. Magnolia Avenue El Cajon, CA 92020

Number, Street, City, State & ZIP Code

5. Debtor's website (URL) _____

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))☐ Partnership (excluding LLP)☐ Other. Specify: _____

Debtor **NITE LIFE EAST, LLC**
Name

Case number (if known)

7. Describe debtor's business**A. Check one:**

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

7139**8. Under which chapter of the Bankruptcy Code is the debtor filing?****Check one:**

- ☒ Chapter 7
- ☐ Chapter 9
- ☐ Chapter 11. **Check all that apply:**

A debtor who is a "small business debtor" must check the first sub-box. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box.

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11**. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

Debtor **NITE LIFE EAST, LLC**
Name

Case number (if known)

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?
- ☒ No
☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor Relationship
District When Case number, if known

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard?

- ☐ It needs to be physically secured or protected from the weather.

- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

- ☐ Other

Where is the property?

Number, Street, City, State & ZIP Code

Is the property insured?

☐ No

☐ Yes. Insurance agency

Contact name

Phone

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

☐ 1-49

☒ 50-99

☐ 100-199

☐ 200-999

☐ 1,000-5,000

☐ 5001-10,000

☐ 10,001-25,000

☐ 25,001-50,000

☐ 50,001-100,000

☐ More than 100,000

15. Estimated Assets

☒ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☐ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

16. Estimated liabilities

☐ \$0 - \$50,000

☐ \$1,000,001 - \$10 million

☐ \$500,000,001 - \$1 billion

Debtor	NITE LIFE EAST, LLC	Case number (if known)	
	Name		
	<input checked="" type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion

Debtor **NITE LIFE EAST, LLC**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 5/14/24
MM/DD/YYYY**X** 
Signature of authorized representative of debtor**Basem Itani**
Printed nameTitle **Manager****18. Signature of attorney****X** /s/ Jeanette E. McPherson
Signature of attorney for debtorDate 05/14/2024
MM/DD/YYYY**Jeanette McPherson**
Printed name**Fox Rothschild LLP**
Firm name**1900 Festival Plaza Drive**
Suite 700
Las Vegas, NV 89135
Number, Street, City, State & ZIP CodeContact phone **(702) 262-6899**Email address **JMcPherson@foxrothschild.com****5423 NV**
Bar number and State

NITE LIFE EAST, LLC

ACTION BY WRITTEN CONSENT OF THE MANAGER

IT IS RESOLVED that in the judgment of the Manager, it is desirable and in the best interests of **Nite Life East, LLC**, a Nevada domestic limited liability company (the “Company”), that the Company commence a Chapter 7 case (the “Chapter 7 Case”) by filing a voluntary petition for relief under the provisions of chapter 7 of title 11, of the United States Code (the “Bankruptcy Code”) in the United States Bankruptcy Court for the District of Nevada (the “Bankruptcy Court”); and it is

FURTHER RESOLVED that the Manager of the Company or any other duly authorized officer or officers (the “Proper Officers”) of the Company are hereby authorized and empowered to execute and verify or certify on behalf of, and in the name of, the Company, a voluntary petition for relief under chapter 7 of the Bankruptcy Code and to cause appropriate documents to be filed in the United States Bankruptcy Court for the District of Nevada, and any affidavits, forms, schedules, lists, applications or any other pleadings or documents which are necessary or appropriate to file the voluntary petition; and it is

FURTHER RESOLVED that the Proper Officers of the Company be, and they hereby are, authorized and empowered to execute on behalf of, and in the name of, the Company any and all plans of reorganization under chapter 7 of the Bankruptcy Code, including any and all modifications, supplements, and amendments thereto, and to cause the same to be filed in the United States Bankruptcy Court for the District of Nevada at such time as said authorized officer executing the same shall determine; and it is

FURTHER RESOLVED that in connection with the commencement of the chapter 7 case by the Company, the Proper Officers of the Company be and hereby are, authorized and empowered on behalf of, and in the name of, the Company to execute and file all first-day pleadings and related documents on such terms and conditions as such officer or officers executing the same may consider necessary, proper or desirable, such determination to be conclusively evidenced by such execution or the taking of such action, and to consummate the transactions contemplated by such agreements or instruments on behalf of the Company; and it is

FURTHER RESOLVED that the law firm of Fox Rothschild, LLP, is hereby employed as general bankruptcy counsel for the Company upon such terms and conditions as the Proper Officers shall approve, to render legal services to, and to represent, the Company in connection with the chapter 7 case, subject to Bankruptcy Court approval, and in connection therewith, the Proper Officers of the Company are hereby authorized and directed to execute appropriate retention agreements and pay appropriate retainers prior to and immediately upon the filing of the chapter 7 case and cause to be filed with the Bankruptcy Court an appropriate application for authority to retain the services of such firm; and it is

FURTHER RESOLVED that the Proper Officers of the Company are hereby authorized to employ and retain on behalf of the Company such other professionals as they deem necessary or appropriate upon such terms and conditions as the Proper Officers shall approve, to provide services to the Company as may be requested by the Property Officers of the Company in connection with the chapter 7 case and with respect to other related matters, with a view to the successful prosecution of such case; and it is

FURTHER RESOLVED that the Proper Officers of the Company are authorized and directed to take any and all further action, and to execute and deliver in the name of, and on behalf of, the Company, any and all such other and further instruments and documents and to pay all such expenses (subject to Bankruptcy Court approval), where necessary or appropriate in order to carry out fully the intent and accomplish the purposes of the resolutions adopted herein; and it is

FURTHER RESOLVED that all acts lawfully done or actions lawfully taken by the Proper Officers or the Manager of the Company to file the voluntary petition for relief under chapter 7 of the Bankruptcy Code or in any other connection with the chapter 7 case of the Company, or any matter related thereto, or by virtue of these resolutions be, and hereby are, in all respects ratified, confirmed, and approved.

IN WITNESS WHEREOF, the undersigned has signed this Written Consent as of this 29 day of April, 2024.

NITE LIFE EAST, LLC,
a Nevada domestic limited liability company

By: IMAGINATION CORPORATION,
Manager of NITE LIFE EAST, LLC

By: 
DONALD KRONTZ, President

Fill in this information to identify the case:

Debtor name NITE LIFE EAST, LLCUnited States Bankruptcy Court for the: DISTRICT OF NEVADA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 5/14/24

x

Signature of individual signing on behalf of debtor

Basem Itani

Printed name

Manager

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **NITE LIFE EAST, LLC**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)1a. **Real property:**Copy line 88 from *Schedule A/B*..... \$ **0.00**1b. **Total personal property:**Copy line 91A from *Schedule A/B*..... \$ **44,321.42**1c. **Total of all property:**Copy line 92 from *Schedule A/B*..... \$ **44,321.42**

Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **0.00**3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)3a. **Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **15,034.66**3b. **Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **42,022.00**4. **Total liabilities**
Lines 2 + 3a + 3b\$ **57,056.66**

Fill in this information to identify the case:Debtor name NITE LIFE EAST, LLCUnited States Bankruptcy Court for the: DISTRICT OF NEVADA

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

Oxford Bank
60 South Washington Street
3.1. Oxford, MI 48371

Business Checking**1537****\$28,498.94****4. Other cash equivalents (Identify all)**

4.1. Funds held by ADP (Debtor's payroll company) for uncashed employee checks. See attached list.

\$5,822.48**5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$34,321.42**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?**

- ☒ No. Go to Part 4.
☐ Yes Fill in the information below.

Debtor NITE LIFE EAST, LLC
Name

Case number (If known) _____

Part 4: Investments

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.
☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture			
40.	Office fixtures			
41.	Office equipment, including all computer equipment and communication systems equipment and software See Attached List (Magnolia location)	\$0.00	N/A	\$10,000.00

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.**
Add lines 39 through 42. Copy the total to line 86.

\$10,000.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☒ No
☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☒ No. Go to Part 9.
☐ Yes Fill in the information below.

Debtor NITE LIFE EAST, LLC
Name

Case number (if known) _____

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☐ No. Go to Part 10.
☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.
☐ Yes Fill in the information below.

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☐ Yes Fill in the information below.

Debtor **NITE LIFE EAST, LLC**
Name

Case number (if known)

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$34,321.42	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$0.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$10,000.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$0.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	\$0.00	
91. Total. Add lines 80 through 90 for each column	\$44,321.42	\$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$44,321.42

Schedule B - Question 4

CHECK AMOUNT	DATE ISSUED	EMPLOYEE NAME
\$ 391.62	12/8/2023	CALDERON,GABRIELA V
\$ 794.75	11/10/2023	CALDERON,GABRIELA V
\$ 590.41	1/19/2024	CAMPOS,JEWEL L
\$ 79.11	12/22/2023	MARTINEZ,AMANDA
\$ 112.17	12/8/2023	NUNES,JESSICA
\$ 553.66	1/19/2024	NUNES,JESSICA
\$ 758.68	1/5/2024	RODRIGUEZ,KARLA G
\$ 496.35	11/24/2023	RODRIGUEZ,KARLA G
\$ 331.72	12/8/2023	RODRIGUEZ,KARLA G
\$ 670.91	12/22/2023	RODRIGUEZ,KARLA G
\$ 819.20	1/19/2024	RODRIGUEZ,KARLA G
\$ 223.90	11/10/2023	RODRIGUEZ,KARLA G
\$ 5,822.48	Total	

Fill in this information to identify the case:

Debtor name NITE LIFE EAST, LLCUnited States Bankruptcy Court for the: DISTRICT OF NEVADA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	HVM Investment Co. Limited Partnership Creditor's Name 8252 E Lansing Rd Durand, MI 48429 Creditor's mailing address Creditor's email address, if known Date debt was incurred 2/6/2024 Last 4 digits of account number None Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority. 1. HVM Investment Co. Limited Partnership 2. Imagination Corporation	Describe debtor's property that is subject to a lien Property stored at Magnolia location Describe the lien UCC Is the creditor an insider or related party? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$10,000.00

2.2	Imagination Corporation Creditor's Name 8252 E Lansing Rd Durand, MI 48429 Creditor's mailing address Creditor's email address, if known Date debt was incurred 2/6/2024 Last 4 digits of account number None	Describe debtor's property that is subject to a lien Property stored at Magnolia location Describe the lien UCC Is the creditor an insider or related party? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)	Unknown	\$10,000.00
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Debtor **NITE LIFE EAST, LLC**

Name

Case number (if known)

Do multiple creditors have an interest in the same property?☐ No☒ Yes. Specify each creditor, including this creditor and its relative priority.**Specified on line 2.1****As of the petition filing date, the claim is:**

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$0.00

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Fill in this information to identify the case:

Debtor name **NITE LIFE EAST, LLC**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address Adrienna Riley 1625 Santa Venetia St #2202 Chula Vista, CA 91913 Date or dates debt was incurred 01/06/2023 Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Employee Wages (Uncashed Check) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$79.26 \$79.26
2.2	Priority creditor's name and mailing address Alexandra Cobain 1316 E. 17th St. National City, CA 91950 Date or dates debt was incurred 5/14/2021 Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Employee Wages (Uncashed Check) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$60.03 \$60.03

Debtor	NITE LIFE EAST, LLC Name	Case number (if known)
2.3	Priority creditor's name and mailing address Alonzo Bingham 2424 Workman St #D Los Angeles, CA 90031	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred 03/01/2022	Basis for the claim: Employee Wages (Uncashed Check)
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.4	Priority creditor's name and mailing address Amanda Martinez 225 Oberle Ct Oceanside, CA 92058	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred 12/22/2023	Basis for the claim: Employee Wages (Uncashed Check- Funds Held by ADP)
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.5	Priority creditor's name and mailing address Andrea Steagall-Gonzaleez 1501 E. Grand Ave. Escondido, CA 92027	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred 02/18/2022	Basis for the claim: Employee Wages (Uncashed Check)
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.6	Priority creditor's name and mailing address Andrea Steagall-Gonzaleez 1501 E. Grand Ave. Escondido, CA 92027	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred 03/04/2022	Basis for the claim: Employee Wages (Uncashed Check)
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	NITE LIFE EAST, LLC Name	Case number (if known)
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2.7	Priority creditor's name and mailing address Anelisa Davey 6161 Cumberland St. San Diego, CA 92139	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$33.75	\$33.75
	Date or dates debt was incurred 09/30/2022	Basis for the claim: Employee Wages (Uncashed Check)		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.8	Priority creditor's name and mailing address Antonia Roybal 1228 Earle Drive National City, CA 91950	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$62.32	\$62.32
	Date or dates debt was incurred 1/1/2022	Basis for the claim: Employee Wages (Uncashed Check)		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.9	Priority creditor's name and mailing address Bailey Connors-Battes 7423 Radenz Ave. San Diego, CA 92111	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$728.63	\$728.63
	Date or dates debt was incurred 06/23/2023	Basis for the claim: Employee Wages (Uncashed Check)		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.10	Priority creditor's name and mailing address Caroline Munoz 2885 Menlo Ave. San Diego, CA 92105	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$98.27	\$98.27
	Date or dates debt was incurred 10/28/2022	Basis for the claim: Employee Wages (Uncashed Check)		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	NITE LIFE EAST, LLC		Case number (if known)
	Name		

2.11	Priority creditor's name and mailing address Catalina Miramontes 1724 National Ave. San Diego, CA 92113	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$45.21	\$45.21
	Date or dates debt was incurred 08/18/2023	Basis for the claim: Employee Wages (Uncashed Check)		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.12	Priority creditor's name and mailing address Chleo Eustaquio 6345 El Cajon Blvd. #2311 San Diego, CA 92115	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$148.05	\$148.05
	Date or dates debt was incurred 07/01/2022	Basis for the claim: Employee Wages (Uncashed Check)		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.13	Priority creditor's name and mailing address Danika Smolen 710 W. Grand Ave #2117 Escondido, CA 92025	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$185.92	\$185.92
	Date or dates debt was incurred 03/03/2023	Basis for the claim: Employee Wages (Uncashed Check)		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.14	Priority creditor's name and mailing address Darlene Cortez 387 Bay Leaf Dr. Chula Vista, CA 91910	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$53.79	\$53.79
	Date or dates debt was incurred 5/14/2021	Basis for the claim: Employee Wages (Uncashed Check)		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	NITE LIFE EAST, LLC		Case number (if known)
	Name		

2.15	Priority creditor's name and mailing address Darlene Cortez 387 Bay Leaf Dr. Chula Vista, CA 91910	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$154.17	\$154.17
	Date or dates debt was incurred 5/25/2021	Basis for the claim: Employee Wages (Uncashed Check)		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.16	Priority creditor's name and mailing address Department of the Treasury Internal Revenue Service Ogden, UT 84201	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$445.05	\$445.05
	Date or dates debt was incurred 2024	Basis for the claim: FUTA Taxes Owed for 1st Quarter 2024		
	Last 4 digits of account number 7697 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.17	Priority creditor's name and mailing address Erin Warner 30919 Summer Breeze Dr. Denham Springs, LA 70726	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$50.67	\$50.67
	Date or dates debt was incurred 06/09/2023	Basis for the claim: Employee Wages (Uncashed Check)		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.18	Priority creditor's name and mailing address Gabriela V. Calderon 231 Montgomery St Chula Vista, CA 91911	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$391.62	\$391.62
	Date or dates debt was incurred 12/08/2023	Basis for the claim: Employee Wages (Uncashed Check- Funds Held by ADP)		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	NITE LIFE EAST, LLC Name	Case number (if known)
2.19	Priority creditor's name and mailing address Gabriela V. Calderon 231 Montgomery St Chula Vista, CA 91911	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		\$794.75 \$794.75
	Date or dates debt was incurred 11/10/2023	Basis for the claim: Employee Wages (Uncashed Check- Funds Held by ADP)
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.20	Priority creditor's name and mailing address Guadalupe Soltero 7914 Barton Dr. Lemon Grove, CA 91945	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		\$42.15 \$42.15
	Date or dates debt was incurred 08/18/2023	Basis for the claim: Employee Wages (Uncashed Check)
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.21	Priority creditor's name and mailing address Jessica Nunes 10032 N. Magnolia Ave #1-5 Santee, CA 92071	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		\$620.94 \$620.94
	Date or dates debt was incurred 02/17/2023	Basis for the claim: Employee Wages (Uncashed Check)
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.22	Priority creditor's name and mailing address Jessica Nunes 10032 N. Magnolia Ave #1-5 Santee, CA 92071	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		\$112.17 \$112.17
	Date or dates debt was incurred 12/08/2023	Basis for the claim: Employee Wages (Uncashed Check- Funds Held by ADP)
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	NITE LIFE EAST, LLC Name	Case number (if known)
2.23	Priority creditor's name and mailing address Jessica Nunes 10032 N. Magnolia Ave #1-5 Santee, CA 92071	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		\$533.66 \$533.66
	Date or dates debt was incurred 01/19/2024	Basis for the claim: Employee Wages (Uncashed Check- Funds Held by ADP)
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.24	Priority creditor's name and mailing address Jessica Valenzuela 1012 San Juan St. Oceanside, CA 92058	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		\$117.79 \$117.79
	Date or dates debt was incurred 09/15/2023	Basis for the claim: Employee Wages (Uncashed Check)
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.25	Priority creditor's name and mailing address Jewel L. Campos 40 Bonita Rd Chula Vista, CA 91910	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		\$590.41 \$590.41
	Date or dates debt was incurred 01/19/2024	Basis for the claim: Employee Wages (Uncashed Check- Funds Held by ADP)
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.26	Priority creditor's name and mailing address Karla Rodriguez 770 Colorado Ave #B Chula Vista, CA 91910	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		\$290.38 \$290.38
	Date or dates debt was incurred 08/18/2023	Basis for the claim: Employee Wages (Uncashed Check)
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	NITE LIFE EAST, LLC Name	Case number (if known)
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2.27	Priority creditor's name and mailing address Karla Rodriguez 770 Colorado Ave #B Chula Vista, CA 91910	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$609.02	\$609.02
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Date or dates debt was incurred 09/01/2023	Basis for the claim: Employee Wages (Uncashed Check)
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Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.28	Priority creditor's name and mailing address Karla Rodriguez 770 Colorado Ave #B Chula Vista, CA 91910	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$391.08	\$391.08
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Date or dates debt was incurred 09/15/2023	Basis for the claim: Employee Wages (Uncashed Check)
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Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.29	Priority creditor's name and mailing address Karla Rodriguez 770 Colorado Ave #B Chula Vista, CA 91910	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$328.51	\$328.51
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Date or dates debt was incurred 09/29/2023	Basis for the claim: Employee Wages (Uncashed Check)
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Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.30	Priority creditor's name and mailing address Karla Rodriguez 770 Colorado Ave #B Chula Vista, CA 91910	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$425.79	\$425.79
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Date or dates debt was incurred 10/13/2023	Basis for the claim: Employee Wages (Uncashed Check)
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Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	NITE LIFE EAST, LLC		Case number (if known)
	Name		

2.31	Priority creditor's name and mailing address Karla Rodriguez 770 Colorado Ave #B Chula Vista, CA 91910	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$167.43	\$167.43
	Date or dates debt was incurred 10/27/2023	Basis for the claim: Employee Wages (Uncashed Check)		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.32	Priority creditor's name and mailing address Karla Rodriguez 770 Colorado Ave #B Chula Vista, CA 91910	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$758.68	\$758.68
	Date or dates debt was incurred 01/05/2024	Basis for the claim: Employee Wages (Uncashed Check- Funds Held by ADP)		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.33	Priority creditor's name and mailing address Karla Rodriguez 770 Colorado Ave #B Chula Vista, CA 91910	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$496.35	\$496.35
	Date or dates debt was incurred 11/24/2023	Basis for the claim: Employee Wages (Uncashed Check- Funds Held by ADP)		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.34	Priority creditor's name and mailing address Karla Rodriguez 770 Colorado Ave #B Chula Vista, CA 91910	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$331.72	\$331.72
	Date or dates debt was incurred 12/08/2023	Basis for the claim: Employee Wages (Uncashed Check- Funds Held by ADP)		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	NITE LIFE EAST, LLC	Case number (if known)		
	Name			
2.35	Priority creditor's name and mailing address Karla Rodriguez 770 Colorado Ave #B Chula Vista, CA 91910	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$670.91	\$670.91
	Date or dates debt was incurred 12/22/2023	Basis for the claim: Employee Wages (Uncashed Check- Funds Held by ADP)		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.36	Priority creditor's name and mailing address Karla Rodriguez 770 Colorado Ave #B Chula Vista, CA 91910	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$819.20	\$819.20
	Date or dates debt was incurred 01/19/2024	Basis for the claim: Employee Wages (Uncashed Check- Funds Held by ADP)		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.37	Priority creditor's name and mailing address Karla Rodriguez 770 Colorado Ave #B Chula Vista, CA 91910	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$223.90	\$223.90
	Date or dates debt was incurred 11/10/2023	Basis for the claim: Employee Wages (Uncashed Check- Funds Held by ADP)		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.38	Priority creditor's name and mailing address Lamerria Hall 10916 Evening Dr. E #48 San Diego, CA 92128	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$815.29	\$815.29
	Date or dates debt was incurred 08/04/2023	Basis for the claim: Employee Wages (Uncashed Check)		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	NITE LIFE EAST, LLC Name	Case number (if known)
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2.39	Priority creditor's name and mailing address Lataisia Mcwhorter 1204 N. Escondido Blvd #B16 Escondido, CA 92026	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$62.35	\$62.35
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Date or dates debt was incurred 09/30/2022	Basis for the claim: Employee Wages (Uncashed Check)
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Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.40	Priority creditor's name and mailing address Liliana Moreno-Bautista 171 N. First St. #19 El Cajon, CA 92021	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$345.36	\$345.36
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Date or dates debt was incurred 11/12/2021	Basis for the claim: Employee Wages (Uncashed Check)
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Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.41	Priority creditor's name and mailing address Liliana Ramirez 1528 San Altos Place Lemon Grove, CA 91945	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$22.55	\$22.55
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Date or dates debt was incurred 09/17/2021	Basis for the claim: Employee Wages (Uncashed Check)
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Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.42	Priority creditor's name and mailing address Mercedes Gusman-Ponce 203 Laurel Ave #62 National City, CA 91950	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$104.10	\$104.10
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Date or dates debt was incurred 9/17/2021	Basis for the claim: Employee Wages (Uncashed Check)
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Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	NITE LIFE EAST, LLC Name	Case number (if known) _____
2.43	Priority creditor's name and mailing address Morgan Spires 6161 Fairmount Ave. #545 San Diego, CA 92120	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred 12/23/2022	Basis for the claim: Employee Wages (Uncashed Check)
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$151.48 \$151.48
2.44	Priority creditor's name and mailing address Nadine Perry 565 G St. #B Chula Vista, CA 91910	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred 02/04/2022	Basis for the claim: Employee Wages (Uncashed Check)
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$256.07 \$256.07
2.45	Priority creditor's name and mailing address Nadine Perry 565 G St. #B Chula Vista, CA 91910	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred 02/18/2022	Basis for the claim: Employee Wages (Uncashed Check)
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$65.95 \$65.95
2.46	Priority creditor's name and mailing address Natalee Castro 330 15th St. #45 San Diego, CA 92101	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred 07/21/2023	Basis for the claim: Employee Wages (Uncashed Check)
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$247.65 \$247.65

Debtor	NITE LIFE EAST, LLC	Case number (if known)		
	Name			

2.47	Priority creditor's name and mailing address Shadejah Houghton Fillmore 2796 47th St. San Diego, CA 92105	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$32.68	\$32.68
	Date or dates debt was incurred 06/24/2022	Basis for the claim: Employee Wages (Uncashed Check)		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.48	Priority creditor's name and mailing address Shakayla Stewart 3076 C St. San Diego, CA 92102	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$109.38	\$109.38
	Date or dates debt was incurred 06/09/2023	Basis for the claim: Employee Wages (Uncashed Check)		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.49	Priority creditor's name and mailing address Stephanie Perry 393 H St. #324 Spring Valley, CA 91977	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$102.28	\$102.28
	Date or dates debt was incurred 10/29/2021	Basis for the claim: Employee Wages (Uncashed Check)		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.50	Priority creditor's name and mailing address Stephanie Perry 1307 Capistrano Ave. Spring Valley, CA 91977	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$116.11	\$116.11
	Date or dates debt was incurred 11/25/2022	Basis for the claim: Employee Wages (Uncashed Check)		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	NITE LIFE EAST, LLC Name		Case number (if known)
2.51	Priority creditor's name and mailing address Tameron Luckett 45540 Coosan Ct. Great Mills, MD 20634	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<div style="display: flex; justify-content: space-between;"> \$330.16 \$330.16 </div>
	Date or dates debt was incurred 10/13/2023	Basis for the claim: Employee Wages (Uncashed Check)	
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.52	Priority creditor's name and mailing address Tiffany Frazer 12001 Woodside Ave. Lakeside, CA 92040	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<div style="display: flex; justify-content: space-between;"> \$51.51 \$51.51 </div>
	Date or dates debt was incurred 07/07/2023	Basis for the claim: Employee Wages (Uncashed Check)	
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.53	Priority creditor's name and mailing address Trina Muraoka 1109 Majestad Ln. Chula Vista, CA 91910	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<div style="display: flex; justify-content: space-between;"> \$43.25 \$43.25 </div>
	Date or dates debt was incurred 12/23/2022	Basis for the claim: Employee Wages (Uncashed Check)	
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.54	Priority creditor's name and mailing address Vanessa Mercado 4210 Hilltop Dr #A San Diego, CA 92102	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<div style="display: flex; justify-content: space-between;"> \$98.93 \$98.93 </div>
	Date or dates debt was incurred 8/202/2021	Basis for the claim: Employee Wages (Uncashed Check)	
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

Debtor NITE LIFE EAST, LLC Name		Case number (if known)	
3.1	Nonpriority creditor's name and mailing address ADP, Inc. P.O. Box 9001006 Louisville, KY 40290 Date(s) debt was incurred <u>2024</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Payroll Services for 2024 W-2s</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$172.00
3.2	Nonpriority creditor's name and mailing address Brena Scarcella c/o Gruenberg Law 2155 First Avenue San Diego, CA 92101 Date(s) debt was incurred <u>2021</u> Last 4 digits of account number <u>None</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Lawsuit Filed</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.3	Nonpriority creditor's name and mailing address CT Corporation P.O. Box 4349 Carol Stream, IL 60197-4349 Date(s) debt was incurred <u>05/10/2024</u> Last 4 digits of account number <u>6843</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Registered Agent Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.4	Nonpriority creditor's name and mailing address Judicate West 1851 East First Street, Suite 1600 Santa Ana, CA 92705 Date(s) debt was incurred <u>04/29/2024</u> Last 4 digits of account number <u>7144</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Arbitration Fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$41,850.00
3.5	Nonpriority creditor's name and mailing address Karla Chevreuil c/o Gruenberg Law 2155 First Avenue San Diego, CA 92101 Date(s) debt was incurred <u>2021</u> Last 4 digits of account number <u>None</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Lawsuit Filed</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.6	Nonpriority creditor's name and mailing address Kathleen Kozlowski c/o Gruenberg Law 2155 First Avenue San Diego, CA 92101 Date(s) debt was incurred <u>2021</u> Last 4 digits of account number <u>None</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Lawsuit Filed</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.7	Nonpriority creditor's name and mailing address Rita Jean Litynski c/o Bibiyan Law Group, P.C. 8484 Wilshire Blvd, Suite 500 Beverly Hills, CA 90211 Date(s) debt was incurred <u>2023</u> Last 4 digits of account number <u>None</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Labor Dispute</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor **NITE LIFE EAST, LLC**
Name

Case number (if known)

3.8 Nonpriority creditor's name and mailing address

Tanika Brown
c/o Gruenberg Law
2155 First Avenue
San Diego, CA 92101-2013Date(s) debt was incurred 2021Last 4 digits of account number NoneAs of the petition filing date, the claim is: *Check all that apply.*

- ☒ Contingent
- ☒ Unliquidated
- ☒ Disputed

Basis for the claim: Lawsuit FiledIs the claim subject to offset? ☒ No ☐ YesUnknown**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Bibiyan Law Group, P.C. 8484 Wilshire Blvd, Suite 500 Beverly Hills, CA 90211	Line <u>3.7</u> <input type="checkbox"/> Not listed. Explain _____	<u>None</u>
4.2	Gruenberg Law 2155 First Avenue San Diego, CA 92101-2013	Line <u>3.6</u> <input type="checkbox"/> Not listed. Explain _____	<u>None</u>
4.3	Gruenberg Law 2155 First Avenue San Diego, CA 92101-2013	Line <u>3.5</u> <input type="checkbox"/> Not listed. Explain _____	—
4.4	Gruenberg Law 2155 First Avenue San Diego, CA 92101-2013	Line <u>3.8</u> <input type="checkbox"/> Not listed. Explain _____	—
4.5	Gruenberg Law 2155 First Avenue San Diego, CA 92101-2013	Line <u>3.2</u> <input type="checkbox"/> Not listed. Explain _____	—

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ <u>15,034.66</u>
5b. +	\$ <u>42,022.00</u>
5c.	\$ <u>57,056.66</u>

Fill in this information to identify the case:Debtor name NITE LIFE EAST, LLCUnited States Bankruptcy Court for the: DISTRICT OF NEVADA

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.**1. Does the debtor have any executory contracts or unexpired leases?**☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).*Property***2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.1. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

Management & Support Agreement entered into on July 31, 2023, but effective as of January 1, 2021, expiring 2 years from the date of the agreement. Unknown (Month to Month)**Deja Vu Services, Inc.
P.O. Box 138
Durand, MI 48429**

2.2. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

Commercial Lease for real property located at 8290 Broadway, Lemon Grove, Ca 91945, commencing on January 8, 2012 through January 31, 2017. Under the Holdover terms, the lease converts to month-to-month tenancy. Debtor has vacated the premises. (Month to Month)**MIC Limited
c/o Modern Bookkeeping, Inc.
8252 E. Lansing Road, Suite 101
Durand, MI 48429**

Fill in this information to identify the case:

Debtor name **NITE LIFE EAST, LLC**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206H
Schedule H: Your Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 **1560 N. Magnolia Ave., LLC****8252 E. Lansing Rd.
Durand, MI 48429****Rita Jean Litynski**☐ D _____☒ E/F **3.7**☐ G _____2.2 **3610 Barnet Ave., LLC****8290 E. Lansing Rd
Durand, MI 48429****Rita Jean Litynski**☐ D _____☒ E/F **3.7**☐ G _____2.3 **Bijou - Century, LLC****P.O. Box 2602
Seattle, WA 98111****Rita Jean Litynski**☐ D _____☒ E/F **3.7**☐ G _____2.4 **Bob Martin, Inc.****700 Garden Grove Blvd.
Westminster, CA 92683****Rita Jean Litynski**☐ D _____☒ E/F **3.7**☐ G _____2.5 **BT California, LLC****P.O. Box 2602
Seattle, WA 98111****Rita Jean Litynski**☐ D _____☒ E/F **3.7**☐ G _____

Debtor **NITE LIFE EAST, LLC**

Case number (if known) _____

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.6	CBDM Redlands, LLC	700 Garden Grove Blvd. Westminster, CA 92683	Rita Jean Litynski	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.7</u> <input type="checkbox"/> G _____
<hr/>				
2.7	Deanna LaPoint	8252 E. Lansing Rd. Durand, MI 48429	Rita Jean Litynski	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.7</u> <input type="checkbox"/> G _____
<hr/>				
2.8	Deja Vu - San Francisco, LLC	P.O. Box 2602 Seattle, WA 98111	Rita Jean Litynski	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.7</u> <input type="checkbox"/> G _____
<hr/>				
2.9	Deja vu Services, Inc.	8252 E. Lansing Rd. Durand, MI 48429	Rita Jean Litynski	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.7</u> <input type="checkbox"/> G _____
<hr/>				
2.10	Deja vu Showgirls of San Francisco, LLC	P.O. Box 2602 Seattle, WA 98111	Rita Jean Litynski	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.7</u> <input type="checkbox"/> G _____
<hr/>				
2.11	Eyeful, Inc.	8252 E. Lansing Rd. Durand, MI 48429	Rita Jean Litynski	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.7</u> <input type="checkbox"/> G _____
<hr/>				
2.12	Gold Club - S.F., LLC	P.O. Box 2602 Seattle, WA 98111	Rita Jean Litynski	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.7</u> <input type="checkbox"/> G _____
<hr/>				
2.13	Grapevine Entertainment	8252 E. Lansing Rd. Durand, MI 48429	Rita Jean Litynski	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.7</u> <input type="checkbox"/> G _____
<hr/>				

Debtor **NITE LIFE EAST, LLC**

Case number (if known) _____

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.14	Harry Mohney	8252 E. Lansing Rd. Durand, MI 48429	Rita Jean Litynski	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.7</u> <input type="checkbox"/> G _____
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2.15	Jolar Cinema of San Diego	8252 E. Lansing Rd. Durand, MI 48429	Rita Jean Litynski	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.7</u> <input type="checkbox"/> G _____
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2.16	Jose Morales	1819 O Avenue National City, CA 91950	Brena Scarcella	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.2</u> <input type="checkbox"/> G _____
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2.17	Jose Morales	1819 O Avenue National City, CA 91950	Karla Chevreuil	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.5</u> <input type="checkbox"/> G _____
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2.18	Jose Morales	1819 O Avenue National City, CA 91950	Kathleen Kozlowski	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.6</u> <input type="checkbox"/> G _____
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2.19	Jose Morales	1819 O Avenue National City, CA 91950	Tanika Brown	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.8</u> <input type="checkbox"/> G _____
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2.20	Joseph Carouba	8252 E. Lansing Rd. Durand, MI 48429	Rita Jean Litynski	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.7</u> <input type="checkbox"/> G _____
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2.21	New Wave, Inc.	721 E. 10th Street Los Angeles, CA 90021	Rita Jean Litynski	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.7</u> <input type="checkbox"/> G _____
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Debtor **NITE LIFE EAST, LLC**

Case number (if known) _____

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.22	S.A.W. Entertainment Limited	P.O. Box 2602 Seattle, WA 98111	Rita Jean Litynski	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.7</u> <input type="checkbox"/> G _____
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2.23	Showgirls of San Diego, Inc.	8252 E. Lansing Rd. Durand, MI 48429	Rita Jean Litynski	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.7</u> <input type="checkbox"/> G _____
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2.24	Stockton Enterprises, LLC	8252 E. Lansing Rd. Durand, MI 48429	Rita Jean Litynski	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.7</u> <input type="checkbox"/> G _____
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Fill in this information to identify the case:Debtor name NITE LIFE EAST, LLCUnited States Bankruptcy Court for the: DISTRICT OF NEVADA

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income**1. Gross revenue from business**☐ None.**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year****From the beginning of the fiscal year to filing date:**From **1/01/2024** to **Filing Date****Sources of revenue**

Check all that apply

☒ Operating a business☐ Other _____**Gross revenue**

(before deductions and exclusions)

\$123,367.94**For prior year:**From **1/01/2023** to **12/31/2023**☒ Operating a business☐ Other _____\$1,567,359.86**For year before that:**From **1/01/2022** to **12/31/2022**☒ Operating a business☐ Other _____\$1,828,958.38**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☐ None.**Description of sources of revenue****Gross revenue from each source**
(before deductions and exclusions)**From the beginning of the fiscal year to filing date:**From **1/01/2024** to **Filing Date**Red Bull Rebates\$1,147.50**For prior year:**From **1/01/2023** to **12/31/2023**Red Bull Rebates, Prior Year Commissions\$1,233.00**For year before that:**From **1/01/2022** to **12/31/2022**Red Bull Rebates & Refund from County of Permit Fees\$1,068.00**Part 2: List Certain Transfers Made Before Filing for Bankruptcy**

Debtor **NITE LIFE EAST, LLC**

Case number (if known) _____

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. Roe Vs. SFBSC Management, LLC P.O. Box 20670 Santa Ana, CA 92799	02/15/2024 (\$40,624.01)	\$40,624.01	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Settlement of lawsuit</u>
3.2. ADP, Inc. P.O. Box 9001006 Louisville, KY 40290	02/09/2024 (\$219.28) (Services) 02/15/2024 (\$8,285.69) (Payroll Taxes) 02/16/2024 (\$426.11) (Payroll Taxes) 02/21/2024 (\$870.02) (Services)	\$9,801.10	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Payroll Taxes/Services</u>
3.3. Nelson Mullins Riley & Scarborough LLP Post Office Drawer 11009 Columbia, SC 29211	03/06/2024 (\$5,135.00) 04/08/2024 (\$1,350.00) 04/08/2024 (\$2,665.00) 04/09/2024 (\$1,500.00)	\$10,650.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other ____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. Deja Vu Services, Inc. P.O. Box 138 Durand, MI 48429	See Attached List.	\$17,237.84	See Attached List.
4.2. Global Licensing, Inc. c/o Modern Bookkeeping, Inc. 8252 E. Lansing Road Durand, MI 48429	See Attached List.	\$15,601.22	Quarterly License Fee

Debtor **NITE LIFE EAST, LLC**

Case number (if known)

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.3. Go Best, LLC c/o Modern Bookkeeping, Inc. 8252 E. Lansing Road Durand, MI 48429	See Attached List.	\$16,654.54	See Attached List.
4.4. MIC Limited c/o Modern Bookkeeping, Inc. 8252 E. Lansing Road, Suite 101 Durand, MI 48429	See Attached List.	\$62,488.00	See Attached List.
4.5. Modern Bookkeeping, Inc. 8252 E. Lansing Road Durand, MI 48429	See Attached List	\$23,800.00	See Attached List.
4.6. National Association of Entertainment Facilities, Inc. c/o Modern Bookkeeping, Inc. 8252 E. Lansing Road Durand, MI 48429	See Attached List.	\$31,427.59	See Attached List.

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. Jane Roe, et al., v. SFBSC Management, LLC, et al. 14-cv-03616-LB (Lead Case)	Class Action	USDC, No. CA District, SF Division 450 Golden Gate Avenue San Francisco, CA 94102	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.2. Kozlowski, et al, v. Nite Life East, LLC, et. al 37-2021-00053632-CU-OE-CTL	Civil	Ca Superior Court, SD Cty, Central Div. 1100 Union Street San Diego, CA 92101	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **NITE LIFE EAST, LLC**

Case number (if known)

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.3.	Rita Jean Litynski v. Nite Life East, LLC, et. al 37-2024-00010882-CU-OE-CTL	Class Action Civil Complaint	CA Superior Court, San Diego County Hall of Justice Courthouse Civil Filing/Records, 2nd Floor 330 West Broadway San Diego, CA 92101	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None
Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**
☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**
☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	<p>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.</p> <p>List unpaid claims on Official Form 106A/B (<i>Schedule A/B: Assets – Real and Personal Property</i>).</p>		

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Fox Rothschild LLP 1980 Festival Plaza Drive, Suite 700 Las Vegas, NV 89135	Attorney Fees and Costs	03/18/2024: \$10,000.00 04/15/2024: \$3,500.00	\$13,500.00
	Email or website address jmcpherson@foxrothschild.com			
	Who made the payment, if not debtor?			

Debtor **NITE LIFE EAST, LLC**

Case number (if known)

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address	Dates of occupancy From-To
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14.1. 8290 Broadway Lemon Grove, CA 91945	1995 - 02/2024
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Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.

☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
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Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**

☒ No.

☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

☒ No. Go to Part 10.

☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold,

Debtor **NITE LIFE EAST, LLC**

Case number (if known) _____

moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1. US Bank (formerly Union Bank - 2711) 2123 LEmon Grove Avenue Lemon Grove, CA 91945	XXXX-0786	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	02/2024 (Funds transferred to new bank account)	\$870.02

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Does debtor still have it?
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20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Tollis, Inc. 1560 N. Magnolia El Cajon, CA 92020	All Employees of Tollis, Inc., and Ryan Carlson, Tim Unglesbee, Bassem Itani, Harry Mohny, and Jason Mohny.	See Attached List.	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.**Report all notices, releases, and proceedings known, regardless of when they occurred.**

Debtor **NITE LIFE EAST, LLC**

Case number (if known) _____

22. **Has the debtor been a party in any judicial or administrative proceeding under any environmental law?** Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. **Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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24. **Has the debtor notified any governmental unit of any release of hazardous material?**

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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Part 13: Details About the Debtor's Business or Connections to Any Business25. **Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
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26. **Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

Name and address	Date of service From-To
26a.1. Modern Bookkeeping, Inc. 8252 E. Lansing Road Durand, MI 48429	1995 - Present

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- ☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

- ☐ None

Name and address	If any books of account and records are unavailable, explain why
26c.1. Modern Bookkeeping, Inc. 8252 E. Lansing Road Durand, MI 48429	

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial

Debtor **NITE LIFE EAST, LLC**

Case number (if known)

statement within 2 years before filing this case.

☒ None**Name and address****27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No☐ Yes. Give the details about the two most recent inventories.**Name of the person who supervised the taking of the inventory****Date of inventory****The dollar amount and basis (cost, market, or other basis) of each inventory****28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.**

Name	Address	Position and nature of any interest	% of interest, if any
Imagination Corporation	8252 E. Lansing Road Durand, MI 48429	Manager	40%
Name	Address	Position and nature of any interest	% of interest, if any
HVM Investment Co., LP	8252 E. Lansing Road Durand, MI 48429	Member	60%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?☒ No☐ Yes. Identify below.**30. Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☒ No☐ Yes. Identify below.**Name and address of recipient****Amount of money or description and value of property****Dates****Reason for providing the value****31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?**☒ No☐ Yes. Identify below.**Name of the parent corporation****Employer Identification number of the parent corporation****32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?**☒ No☐ Yes. Identify below.**Name of the pension fund****Employer Identification number of the pension fund**

Debtor NITE LIFE EAST, LLC

Case number (if known) _____

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.


I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

5/14/24

Signature of individual signing on behalf of the debtor

Basem Itani

Printed name

Position or relationship to debtor Manager

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No☐ Yes

<u>Name & Address</u>	<u>Dates of Pmt</u>	<u>Amt Paid</u>	<u>Reason for Payment</u>
Deja Vu Services, Inc. 7451 Eastgate Rd. Henderson, NV 89011	4/18/2023	117.70	Health Ins. Reimbursement
	5/18/2023	117.70	Health Ins. Reimbursement
	6/13/2023	117.70	Health Ins. Reimbursement
	7/27/2023	117.70	Health Ins. Reimbursement
	8/22/2023	117.70	Health Ins. Reimbursement
	9/21/2023	88.28	Health Ins. Reimbursement
	11/2/2023	102.99	Health Ins. Reimbursement
	11/16/2023	102.99	Health Ins. Reimbursement
	12/14/2023	102.99	Health Ins. Reimbursement
	1/11/2024	102.99	Health Ins. Reimbursement
	Subtotal:	1,088.74	
	6/7/2023	8.50	Legal Reimbursement
	6/28/2023	372.50	Legal Reimbursement
	8/9/2023	522.50	Legal Reimbursement
	9/7/2023	210.00	Legal Reimbursement
	11/2/2023	945.00	Legal Reimbursement
	11/16/2023	81.25	Legal Reimbursement
	11/16/2023	47.50	Legal Reimbursement
	12/14/2023	976.25	Legal Reimbursement
	12/14/2023	162.50	Legal Reimbursement
	12/14/2023	338.75	Legal Reimbursement
	12/14/2023	372.50	Legal Reimbursement
	12/14/2023	6,321.25	Legal Reimbursement
	2/8/2024	149.93	Legal Reimbursement
	2/8/2024	467.50	Legal Reimbursement
	2/8/2024	386.25	Legal Reimbursement
	Subtotal:	11,362.18	
	1/24/2024	542.00	License Reimbursement
	1/24/2024	178.16	License Reimbursement
	Subtotal:	720.16	
	5/4/2023	714.24	Supplies Rebill
	5/18/2023	1,873.89	Supplies Rebill
	6/28/2023	1,023.07	Supplies Rebill
	7/27/2023	294.71	Supplies Rebill
	8/22/2023	90.00	Supplies Rebill
	10/5/2023	20.00	Supplies Rebill
	12/14/2023	45.00	Supplies Rebill
	3/4/2024	5.85	Supplies Rebill
	Subtotal:	4,066.76	
	TOTAL:	17,237.84	
Global Licensing, Inc. c/o 8252 E. Lansing Rd. Durand, MI 48429	4/28/2023	5,122.69	Quarterly license fee
	7/31/2023	4,523.59	Quarterly license fee
	11/2/2023	3,502.29	Quarterly license fee
	1/24/2024	2,452.65	Quarterly license fee
	TOTAL:	15,601.22	
Go Best, LLC	9/21/2023	350.00	Monthly social media

STATEMENT OF FINANCIAL AFFAIRS - QUESTION 4

c/o 8252 E. Lansing Rd.
Durand, MI 48429

9/21/2023	350.00	Monthly social media
9/21/2023	350.00	Monthly social media
9/21/2023	350.00	Monthly social media
9/21/2023	350.00	Monthly social media
9/21/2023	350.00	Monthly social media
9/21/2023	350.00	Monthly social media
9/21/2023	350.00	Monthly social media
9/21/2023	350.00	Monthly social media
10/5/2023	350.00	Monthly social media
11/2/2023	350.00	Monthly social media
12/14/2023	350.00	Monthly social media
1/11/2024	350.00	Monthly social media
2/8/2024	350.00	Monthly social media

Subtotal: 4,900.00

11/2/2023	2,363.55	Secret Shopper rebill
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Subtotal: 2,363.55

4/19/2023	3,668.50	Supplies rebill
7/27/2023	824.99	Supplies rebill
9/21/2023	1,209.04	Supplies rebill
11/16/2023	1,160.02	Supplies rebill
12/5/2023	638.44	Supplies rebill
1/24/2024	600.03	Supplies rebill
1/24/2024	1,157.77	Supplies rebill

Subtotal: 9,258.79

12/14/2023	47.59	Travel rebill
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Subtotal: 47.59

11/2/2023	132.20	Wage rebill
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Subtotal: 132.20

TOTAL: 16,654.54

MIC Limited
c/o 8252 E. Lansing Rd.
Durand, MI 48429

4/21/2023	7,811.00	Rent
5/18/2023	7,811.00	Rent
6/19/2023	7,811.00	Rent
7/20/2023	7,811.00	Rent
8/22/2023	7,811.00	Rent
9/21/2023	7,811.00	Rent
11/2/2023	7,811.00	Rent
11/29/2023	7,811.00	Rent

TOTAL: 62,488.00

Modern Bookkeeping, Inc.
8252 E. Lansing Rd.
Durand, MI 48429

5/4/2023	3,400.00	Services
6/7/2023	3,400.00	Services
7/12/2023	3,400.00	Services
8/9/2023	3,400.00	Services
9/7/2023	3,400.00	Services
10/5/2023	3,400.00	Services
11/2/2023	3,400.00	Services

TOTAL: 23,800.00

STATEMENT OF FINANCIAL AFFAIRS - QUESTION 4

National Association of Entertainment Facilities, Inc.	4/18/2023	6,174.97	Workers Comp Rebill
c/o 8252 E. Lansing Rd.	5/18/2023	3,493.62	Workers Comp Rebill
Durand, MI 48429	6/14/2023	3,752.34	Workers Comp Rebill
	7/12/2023	3,618.15	Workers Comp Rebill
	8/22/2023	3,626.98	Workers Comp Rebill
	9/21/2023	3,433.92	Workers Comp Rebill
	10/18/2023	4,038.20	Workers Comp Rebill
	11/16/2023	2,289.41	Workers Comp Rebill
Subtotal:		30,427.59	
	7/27/2023	1,000.00	Yearly Dues
Subtotal:		1,000.00	
TOTAL:		31,427.59	

B2030 (Form 2030) (12/15)

United States Bankruptcy Court
District of Nevada

In re NITE LIFE EAST, LLC

Debtor(s)

Case No.

Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	<u>13,500.00</u>
Prior to the filing of this statement I have received	\$	<u>13,500.00</u>
Balance Due	\$	<u>0.00</u>

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

Analysis of potential liability and advice regarding settlement with creditors.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

05/14/2024

Date

/s/ Jeanette E. McPherson

Jeanette McPherson

Signature of Attorney

Fox Rothschild LLP

1900 Festival Plaza Drive

Suite 700

Las Vegas, NV 89135

(702) 262-6899 Fax: (702) 597-5503

JMcPherson@foxrothschild.com

Name of law firm

**United States Bankruptcy Court
District of Nevada**

In re **NITE LIFE EAST, LLC**

Debtor(s)

Case No.
Chapter

7

VERIFICATION OF CREDITOR MATRIX

I, the Manager of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date:

5/14/24


Basem Itani/Manager
Signer/Title

NITE LIFE EAST, LLC
c/o CT Corporation System, RA
701 S. Carson Street, Suite 200
Carson City, NV 89701

Jeanette McPherson
Fox Rothschild LLP
1900 Festival Plaza Drive
Suite 700
Las Vegas, NV 89135

1560 N. Magnolia Ave., LLC
8252 E. Lansing Rd.
Durand, MI 48429

3610 Barnet Ave., LLC
8290 E. Lansing Rd
Durand, MI 48429

ADP, Inc.
P.O. Box 9001006
Louisville, KY 40290

Adrienna Riley
Acct No None
1625 Santa Venetia St #2202
Chula Vista, CA 91913

Alexandra Cobain
Acct No None
1316 E. 17th St.
National City, CA 91950

Alonzo Bingham
Acct No None
2424 Workman St #D
Los Angeles, CA 90031

Amanda Martinez
Acct No None
225 Oberle Ct
Oceanside, CA 92058

Andrea Steagall-Gonzaleez
Acct No None
1501 E. Grand Ave.
Escondido, CA 92027

Anelisa Davey
Acct No None
6161 Cumberland St.
San Diego, CA 92139

Antonia Roybal
Acct No None
1228 Earle Drive
National City, CA 91950

Bailey Connors-Battes
Acct No None
7423 Radenz Ave.
San Diego, CA 92111

Bibliyan Law Group, P.C.
Acct No None
8484 Wilshire Blvd, Suite 500
Beverly Hills, CA 90211

Bijou - Century, LLC
P.O. Box 2602
Seattle, WA 98111

Bob Martin, Inc.
700 Garden Grove Blvd.
Westminster, CA 92683

Brena Scarcella
Acct No None
c/o Gruenberg Law
2155 First Avenue
San Diego, CA 92101

BT California, LLC
P.O. Box 2602
Seattle, WA 98111

Caroline Munoz
Acct No None
2885 Menlo Ave.
San Diego, CA 92105

Catalina Miramontes
Acct No None
1724 National Ave.
San Diego, CA 92113

CBDM Redlands, LLC
700 Garden Grove Blvd.
Westminster, CA 92683

Chleo Eustaquio
Acct No None
6345 El Cajon Blvd. #2311
San Diego, CA 92115

CT Corporation
Acct No xxxxxx6843
P.O. Box 4349
Carol Stream, IL 60197-4349

Danika Smolen
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